



*John*

PTO/SB/21 (11-07)

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/701,243
Filing Date	11/03/2003
First Named Inventor	Tal Dayan
Art Unit	2617
Examiner Name	Charles Terrell Shedrick
Attorney Docket Number	111178.00012

### ENCLOSURES (Check all that apply)

- ☐ Fee Transmittal Form
- ☐ Fee Attached
- ☐ Amendment/Reply
  - ☐ After Final
  - ☐ Affidavits/declaration(s)
- ☐ Extension of Time Request
- ☐ Express Abandonment Request
- ☐ Information Disclosure Statement
- ☐ Certified Copy of Priority Document(s)
- ☐ Reply to Missing Parts/Incomplete Application
  - ☐ Reply to Missing Parts under 37 CFR 1.52 or 1.53

- ☐ Drawing(s)
- ☐ Licensing-related Papers
- ☐ Petition
- ☐ Petition to Convert to a Provisional Application
- ☒ Power of Attorney, Revocation
- ☒ Change of Correspondence Address
- ☐ Terminal Disclaimer
- ☐ Request for Refund
- ☐ CD, Number of CD(s) \_\_\_\_\_
- ☐ Landscape Table on CD

- ☐ After Allowance Communication to TC
- ☐ Appeal Communication to Board of Appeals and Interferences
- ☐ Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
- ☐ Proprietary Information
- ☐ Status Letter
- ☐ Other Enclosure(s) (please identify below):

Remarks

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name  
Holland & Knight LLP

Signature  
*John P. Moran*

Printed name  
John P. Moran

Date  
11/13/2007

Reg. No. 30,906

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PTO/SB/82 (01-06)

Approved for use through 12/31/2008. OMB 0851-0035

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AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/701,243
Filing Date	11/03/2003
First Named Inventor	Tal Dayan
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Examiner Name	Charles Terrell Shedrick
Attorney Docket Number	111178.00012

**I hereby revoke all previous powers of attorney given in the above-identified application.**☐ A Power of Attorney is submitted herewith.**OR**☒ I hereby appoint the practitioners associated with the Customer Number:

70144

☒ Please change the correspondence address for the above-identified application to:☒ The address associated with  
Customer Number:

70144

**OR**☐ Firm or  
Individual Name

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I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature

Name

Tom Kim, Chairman for Power Science Inc.

Date

Nov - 9 - 2007

Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

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